

Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040065-1

SERVICES OTHER THAN PERSONAL

D. O. Vou. No.

Bu. Vou. No.

2469

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No.

To

(Payee)

PAID BY

Encl. #1
897-3969-59
102

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				\$2,187.	97
Use continuation sheet(s) if necessary							

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from to Weight Government B/L No. Total \$2,187.97

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

Differences

(Sign original only)

Date 5-2

A like certificate is made by payee on attached bill or bills)

Amount verified; correct for

(Signature or initials) EC

\$2,187.97

Per

Contract No.

Date

Req. No.

Date

Invoice Rec'd.

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$

†

(Authorized Certifying Officer)

By

SIGN
ORIGINAL
ONLY

Title

Title

Date

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

65. Hd TE 7 10 M

Paid by { Check No. dated 19 for \$ (on Treasurer of the United States in favor of payee named above.)
Cash, \$, on 19 Payee (sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary, otherwise the approving signature must be signed on the reverse of the voucher over his official title.

Per

Title

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STATOTHR

SUPP#	SUPPLIER NAME	NO DY	CHECK#	INVOICE	P O	ACCT	ODC	MJO	50	WK	ORDR	AMOUNT	BATCH	TR	M	D	Y
29	CALIFORNIA ELECTRO		26812	67436	12405	12501	1	3032	31			8550	65	0	5	12	9
114	BYMCO ENGINEERING		26825	1080	12520	12501	1	3032	31			2768	59	0	5	11	9
171	MONITOR PRODUCTIONS		26993	3897	12863	12501	1	3032	31			5950	73	0	5	15	9
424	GOODALL ELECTRIC M		27046	454620	13159	12501	1	3032	31			1970	71	0	5	14	9
973	MCCOY ELECTRONICS		27094	9834	10032	12501	1	3032	31			7000	69	0	5	14	9
973	MCCOY ELECTRONICS		27094	9835	12519	12501	1	3032	31			3000	69	0	5	14	9
												29238 *					
												29238 **					